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| **External Application Form** | Qr code  Description automatically generated |

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| **I am Applying for:** | | | | | |
| ***If you are applying for a specific role, complete this section:*** | | | | | |
| **Position Title:** | | | **Job Reference (if known):** | | |
| **Department of Position:** | | | **Hiring Manager:** | | |
| ***If you are interested in entry level opportunities, tick the roles that interest you*** | | | | | |
| **□ Housekeeping/**  **Laundry** | **□ Kitchen Hand** | **□ Food & Beverage or**  **Banquets** | | **□ Maintenance** | **□ Other:** |
| **Availability (Days, Morning/Evening/Night):** | | | | | |

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| **My details** | | | |
| **Name:** | | **Mobile:** | |
| **Email address:** | | | |
| **Right to Work:** | **□ NZ Passport or Permanent Resident** | | **□ Student Visa**  **Expires:** |
| **□ Work Visa**  **Expires:** | | **□ Other (please note)** |

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| **My Employment History**  ***(or attach CV with Application)*** | | | | |
| **Position Worked** | **Workplace** | **From** | **To** | **Responsibilities** |
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| **About Me**  ***Please describe the skills, previous work experience, education and approach that could work well here*** |
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| **My Additional Info** | | | | | |
| Do you currently have, or have you had an injury or medical condition caused by gradual process, disease,  infection or repetitive strain injuries e.g. hearing loss, sensitivity to chemicals, back injury that may be aggravated  or further contributed to by the tasks of this job? | | | | Y/N | |
| Are you aware of any other reason why you may not be able to completely perform the normal duties associated with this position? | | | | Y/N | |
| ***If you answered ‘Y’ on either question above, please provide details below:*** | | | | | |
|  | | | | | |
|  | | | | | |
| If you have a disability, what considerations need to be taken into account for your working environment? | | | | | N/A |
|  | | | | | |
| Please confirm whether you have a criminal record, or are the subject of, or awaiting the hearing of any criminal charges. | | | | | |
| How will you travel to work? | | | | | |
| □ I live locally | □ Own car | □ Public transport\* | □ Other – please specify | | |
| \*Please check route/schedules as needed to ensure you would be able to meet shift work timings | | | | | |

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| **My Referees**  ***Share your Verbal Referees that we may contact*** | |
| **Name:** | **Relationship to you:**  **(ie: previous manager)** |
| **Phone number:** | **Email address:** |
| **Name:** | **Relationship to you:**  **(ie: previous manager)** |
| **Phone number:** | **Email address:** |

* I confirm this is a true and accurate record. I understand that any false information given (including withholding relevant information) may result in disciplinary action.
* I consent to my referees being contacted.
* I have the legal right to work in the role I have applied for

**Signature** **Date**

Please attach your CV and Cover Letter if preferred, or another sheet if you need more space to write.Submit this application (and any additional sheets) directly to the hiring manager, unless otherwise directed. If needed, you can email [hr@waipunahotel.co.nz](mailto:hr@waipunahotel.co.nz).